

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

WILLIAM BOWN  
BONNEVILLE QUARRIES INC  
842 W 400 N  
WEST BOUNTIFUL UT 84087

JB DOGM

M/003/016 6/24/05

## 2. Article Number

(Transfer from service label)

7002 0510 0003 8603 3370

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

SALT LAKE CITY UT 84114-5801  
1594 WEST NORTH TEMPLE STE 1210  
DIVISION OF OIL GAS AND MINING  
STATE OF UTAH

JOELLE BURNS  
DIV. OF OIL GAS & MINING

JUL 1 2005

• Sender: Please print your name, address, and ZIP+4 in this box.

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

Tristina Bown

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Tristina Bown

## C. Date of Delivery

6/29/05

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☒ No

## 3. Service Type

☒ Certified Mail☐ Registered☐ Insured Mail☒ Express Mail☐ Return Receipt for Merchandise☐ C.O.D.

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service

## CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

JB

DOGM

M/003/016

6/24/05

Postage

\$

Certified Fee

Return Receipt Fee  
(Endorsement Required)Restricted Delivery Fee  
(Endorsement Required)

Total Postage &amp; Fees

\$

CO

MC-05-01-07(1)

Postmark  
Here

## Sent To

WILLIAM BOWN - BONNEVILLE QUARRIES

Street, Apt. No.,  
or PO Box No.

842 W 400 N

City, State, ZIP+4

WEST BOUNTIFUL UT 84087

PS Form 3800, January 2001

See Reverse for Instructions